**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZ	ATION		
	(See instruct	ions)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
American Coll	ege of Radiology Association F	Political Action Committee		
ADDRESS (number and	street) 1891 Preston White	e Drive		
(Check if address				
is changed)	Reston		LYA]	20191   -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA	L ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	herrad@bellsouth.i	net 		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address	;		11111	
is changed)				
2. DATE 0.4				
3. FEC IDENTIFICA	TION NUMBER	C C00343459		
4. IS THIS STATEM	IENT NEW (N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my kr	nowledge and belief it is true, correct	and complete	
Type or Print Name of	Treasurer DR William Her	rington		
Type of Time Name of				
Signature of Treasurer	Electronically Filed by <b>DR Willia</b>	am Herrington	Date <b>0</b> 4	1 d Y 2 0 0 9
NOTE: Submission of fa	se, erroneous, or incomplete information m	nay subject the person signing this S	tatement to the penaltic	es of 2 U.S.C. S437g.
	ANY CHANGE IN INFORM	ATION SHOULD BE REPORTE	D WITHIN 10 DAYS	
Office Use Only		For further information Federal Election Comm Toll Free 800-424-9530	nission	FEC FORM 1 (Revised 02/2009)